Last Name	First Name	Middle Name	Social Security Number

Instructions for Completing Net Worth Statement

Having been convicted in the United States District Court, you are required to prepare and file with the probation officer an affidavit fully describing your financial resources, including a complete listing of all assets you own or control as of this date and any assets you have transferred or sold since your arrest. Amendments were made to 18 U.S.C. §§ 3663(a)(1)(B)(i), 3664(d)(3), and 3664(f)(2), and Rule 32(b)(4)(F) to clarify that the assets owned, jointly owned, or controlled by a defendant, and liabilities are all relevant to the court's decision regarding the ability to pay. Your Net Worth Statement should include assets or debts that are yours alone (I-Individual), assets or debts that are jointly (J-Joint) held by you and a spouse or significant other, assets or debts that are held by a spouse or significant other (S-Spouse or Significant Other) that you enjoy the benefits of or make occasional contributions toward, and assets or debts that are held by a dependent (D-Dependent) that you enjoy the benefits of or make occasional contributions toward.

If you are placed on probation or supervised release (or other types of supervision), you may be periodically required to provide updated information fully describing your financial resources and those of your dependents, as described above, to keep a probation officer informed concerning compliance with any condition of supervision, including the payment of any criminal monetary penalties imposed by the court (see 18 U.S.C. § 3603).

Please complete the Net Worth Statement in its entirety. You must answer "None" to any item that is not applicable to your financial condition. Attach additional pages if you need more space for any item. All entries must be accompanied by supporting documentation (see Request for Net Worth Statement Financial Records (Prob. 48A)). Initial and date each page (including any attached pages). Also, sign, date, and attach the Declaration of Defendant or Offender Net Worth & Cash Flow Statements (Prob. 48D).

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T	ast	- N	lar	ne	_

NET WORTH STATEMENT

NOTE: I = Individual J = Joint S = Spouse/Significant Other D = Dependent

		OUNTS (Include all personal OGH accounts, Thrift Savings,		ASSETS cking and savings	accounts, credit u	nions, n	noney mar	kets, cert	ificates	of deposit,
IKA a	I/J S/D	Name of Institution		ldress	Type of Account		count ımber	Person Comm		Balance
Section A										
		TRITIES (Include all stocks in Government securities, etc.)	public corporation	ns, stocks in busine	esses you own or l	nave an	interest in,	bonds, n	nutual f	unds,
	I/J S/D	Name and Kind of	Security	Locatio	on of Security		Numb Uni		Fa	ir Market Value
n B										
Section B										
	MON	EY OWED TO YOU BY OT	T HERS (Include al	l money owed to y	ou by any person	or entit	y.)			
r)	I/J S/D	Name and Address of Debtor	Amount Owed to You	Reason Owed to You	Date Money Loaned	Relate to I	tionship Debtor Pany)	Mon Payn or D Fu Payn Expe	nent Pate Ill nent	Is Debt Collectible ?
Section C										
			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			Initials		Date	

Initials	Date	

Initials _____ Date ____

Last	Name) -											
		INSURANCE (Include type of policeder value [the value of the investment							[the	stated amou	int of cove	rage] and	l cash
n D	I/J S/D	Name and Address of Company and Name of Beneficiary	Policy Number	a whole	Type Polic	of]	Face moun	t	Cash Surrend Value		nount rrowed	Amount You Can Borrow
Section D													
		DEPOSIT BOXES OR STORAGE ccess to in which others are holding a						depos	sit bo	xes or stora	ge space yo	ou rent or	r places you
ш	I/J S/D	Name and Add of Box or Facility L					x Num or Spac			Conter	nts	Fair N	Aarket Value
Section E													
Ω													
	MOT	OR VEHICLES (Include all cars, tru	cks, mobile	homes	s, moto	orcycle	s, all te	rrain v	ehicl	les, boats, ai	rplanes, et	c.)	
Ħ	I/J Year, Make & License S/D Number/Vehicle Identification Number		Mileage		Balance Will			an/Lease Paid Off Ends	Montl Payme	-	Fair Market Value		
Section F													
											\rightarrow		
	DEAL	ESTATE (Include property, parcels	lots times	haras s	and da	valona	d land v	with h	nildir	ngs)			
Ü	I/J S/D	Real Estate Address (include county and state)/ Mortgage Company or Lien Holder	Purchase Date	urchase Purch		nase Mortgage		Date		Monthly Payment		Fair Market Value	
Section G													
												\longrightarrow	
	MOR'	TGAGE LOANS OWED TO YOU	(Include na	me, ado	dress, a	and re	ationshi	ip [if a	ny] t	to the mortg	agee [the p	arty that	bought the
	real es	tate you sold and is making payments Mortgagee (name & address)		/ out an		Doto	Monto	200		Dolloon	Mov		Is Debt
H uo	S/D	Relationship to Mortgagee		Mortgage Balance		Date Mortgage Will be Paid Off			Balloon Payment? If Yes, Date?			nthly ment	Collectible?
Section H													

<u>Last</u>	ast Name -										
	ОТН	ER ASSETS (Include any c ghts, patents, etc.)	ash on hand, jewe	elry, art	, paintings, co	in collections, st	tamp collections,	collectibles, ant	iques,		
	I/J S/D	Description	Loan Balance (if any)	e V	Date Loan Will be Paid Off	Monthly Payment	Where is A Located		Fair Market Value		
Section I											
Sec											
		CIPATED ASSETS (Inclunded plans, inheritance, wills, or						sation or damag	es, profit sharing,		
I/J Amount Received or S/D Expected to Receive Expected to Receive				eason You Ex	xpect This	That Can Veri		n or Company torney, financial tor)			
Section J											
Sec		T ASSETS (Include all true controls the trust assets and							or fiduciary		
	I/J S/D	Name of Trust/ Taxpayer ID#	Value of Trust	Your A	Annual Incon	ne From Trust	Your l	st Assets			
	the las	NESS HOLDINGS (Includ t three years; e.g., self-emp additional pages, if necess	loyed sole proprie								
n K	I/J S/D	Name and Address of Business/ Taxpayer I.D.#	Type of Business Entity	I	ndustry of Business	Date Business Started	Capital Investment to Start	Your Ownership Interest Percentage	Sale Price or Fair Market Value of Your Interest		
Section K											
							Init	ials I	Date		

Initials _____ Date ____

Last	Name	-						
	INCO	ME TAX RETURNS						
		Type of Income Tax Return F	'iled		Last Filin	g Year	You Will Submi	ncome Tax Returns it to the Probation ficer
Section L	Indivi	dual (Form 1040)						
Secti		ership/Limited Liability Company 1065)						
	Corpo	ration (Form 1120)						
	S Corp	poration (Form 1120S)						
		ISFER OF ASSETS (Include any e than \$500.00. Also list any asset					your arrest with a cost	or fair market value
	I/J S/D	Description of Asset/ Reason Transferred/Sold	Date of Transfer/S	ale	Original Cost	Amount You Received, if Any	Name of Purchaser or Person Holding the Asset	Sale Price or Fair Market Value at Transfer
Section M								
Secti								
		ES OF SHAREHOLDERS OR P. ship interest.)	ARTNERS (Incl	ude all shareholde	ers, officers, and/o	r partners, indicating e	
		Name of Business			Names o	of Shareholders/F	Partners	Ownership Interest Percentage
Section N								
Secti								

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Page 6 of

Last	ast Name -									
	ASSETS YOU WILL LIQUIDA imposed.)	ATE (Include all assets	you intend to liquidat	e to satisfy any criminal monetary penalties that may be						
	Asset Description	Estimated Value of Asset	Date You Will Liquidate	Current Location of Asset (if real property, county and state)						
С										
Section O										
Se										
	PROSPECT OF INCREASE IN	N ASSETS (Give a gen	neral statement of the p	prospective increase of the value of any asset you own.)						
n P										
Section P										

Last	Name) -										
					LIA	BILITIES						
	CHAI	RGE ACCOUNTS A	AND LINE	S OF CREDIT (I	nclude all	bank credit ca	rds, line	es of credit,	revolv	ing charge	accou	unts, etc.)
V	I/J S/D	Type of Account or Card	Na	me and Address of Creditor		Credit Limit		nount Owed	Credit Available		Minimum Monthly Payment	
Section A												
	отні	ER DEBTS (Include	mortgage lo	oans, notes payab	le, delingu	ent taxes, and	child su	pport.)				
	I/J S/D	Owed To		Address		Relationsh (if any)		Amount	;	Reason Owed		Monthly Payment
n B						(· · · · · · · · · · · · · · · · · · ·						
Section B												
		TY TO CIVIL SUIT	-				_	T			I	
C	I/J S/D	Name of Plaint in the Case	tiff	Court of Jurisdic and County		Case Number		e of Suit Filed		ate of dgment		gment Amount/ npaid Balance
Section C												
<i>O</i> 1												
		RUPTCY FILING			sted for ar	ny Chapter 7, 1	1, or 13	bankruptcy	filing	s you have	ever	been a party
	to as a	n individual or as a b		ity. Bankruptcy	Danken	ptcy Court	Count	y and State	o e	Date Fi	lad	Date of
ı D	S/D	1 21 1		Case Number		risdiction		y and State Discharge	; 01	Date Fi	ieu	Discharge
Section D												

Signature	 Date	

Las	st Name	First Name	Middle Name	Social Security Number

Instructions for Completing Monthly Cash Flow Statement

Having been convicted in the United States District Court, you are required to prepare and file with the probation officer a statement fully describing your financial resources, including a complete listing of all monthly cash inflows and outflows.

If you are placed on probation or supervised release (or other types of supervision), you may be periodically required to provide updated information fully describing your financial resources and those of your spouse, significant others, or dependents, as described above, to keep a probation officer informed concerning compliance with any condition of supervision, including the payment of any criminal monetary penalties imposed by the court (see 18 U.S.C. § 3603).

Amendments were made to 18 U.S.C. §§ 3663 (a)(1)(B)(i), 3664(d)(3), and 3664(f)(2), and Rule 32(b)(4)(F) to clarify that the assets owned, jointly owned, or controlled by a defendant; liabilities, and the financial needs and earning ability of a defendant and a defendant's dependents are all relevant to the court's decision regarding a defendant's ability to pay. Your Cash Flow Statement should include assets or debts that are yours alone (I-Individual), assets or debts that are jointly (J-Joint) held by you and a spouse or significant other, assets or debts that are held by a spouse or significant other (S-Spouse or Significant Other) that you enjoy the benefits of or make occasional contributions toward, and assets or debts that are held by a dependent (D-Dependent) living in your home that you enjoy the benefits of or make occasional contributions toward.

Please complete the Monthly Cash Flow Statement in its entirety. You must answer "None" to any item that is not applicable to your financial condition. Attach additional pages if you need more space for any item. All entries must be accompanied by supporting documentation (see Request for Cash Flow Statement Financial Records (Prob. 48C)). Initial and date each page (including any attached pages) and sign and date the last page of the Cash Flow Statement.

Last Name -

MONTHLY CASH FLOW STATEMENT

Monthly Cash Inflows

Defendant	Gross	Net
Your Salary/Wages (List both monthly gross earnings and take-home pay after payroll deductions.)		
Your Cash Advances (List all payroll advances or other advances from work.)		
Your Cash Bonuses (List all payments from work in addition to your salary that are not an advance.)		
Commissions (List all non-employee earnings as an independent contractor.)		
Business Income (List both monthly gross income and net income after deducting expenses.)		
Interest (List all interest earned each month.)		
Dividends (List all dividends earned each month.)		
Rental Income (List all monthly income received from real estate properties owned.)		
Trust Income (List all trust income earned each month.)		
Alimony/Child Support (List all alimony or child support payments received each month.)		
Social Security (List all payments received from Social Security.)		
Other Government Benefits (List all amounts received from the government not yet reported (e.g., Aid to Families with Dependent Children.)		
Pensions/Annuities (List all funds received from pensions and annuities each month.)		
Allowances-Housing/Auto/Travel (List all funds received from housing allowances, auto allowances, travel allowances, and any other kind of allowance.)		
Gratuities/Tips (List all gratuities and tips received each month from any and all sources.)		
Spouse/Significant Other Salary/Wages (List all gross and net monthly salary and wages received by your spouse or significant other.)		
Other Joint Spousal Income (List any monthly income jointly earned with your spouse or significant other [e.g., any income from spouse or income from a business owned or operated by the spouse that you have a joint ownership interest in or control]). Income of Other In-House (List all monthly income of others living in the household or the monthly amount actually paid for household bills by these persons.)		
Gifts from Family (List all amounts received as gifts from family members each month.)		
Gifts from Others (List all gifts received from any sources not yet reported.)		
Loans from Your Business (List all loan amounts received each month from all businesses owned or controlled by you.)		
Mortgage Loans (List all amounts received each month from mortgage loans owed to you.)		
Other Loans (List all other loan amounts received each month not yet reported.)		
Other (specify) (List all other amounts received each month not yet reported.)		
TOTALS		

Signature

Necessary Monthly Cash Outflows Am Rent or Mortgage (List monthly rental payment or mortgage payment.) Groceries (List the total monthly amount paid for groceries and number of people in your household.) # Utilities (List the monthly amount paid for electric, heating oil/gas, water/sewer, telephone, and basic cable.) Electric Heating Oil/Gas Water/Sewer Telephone Basic Cable (no premium channels) Transportation (List monthly amount paid for gasoline, motor oil, necessary auto repairs, or the cost of public transportation.) Insurance (List the monthly amount paid for auto, health, homeowner/rental, and life insurance.) Auto Health Homeowner/Rental	ount
Rent or Mortgage (List monthly rental payment or mortgage payment.) Groceries (List the total monthly amount paid for groceries and number of people in your household.) # Utilities (List the monthly amount paid for electric, heating oil/gas, water/sewer, telephone, and basic cable.) Electric Heating Oil/Gas Water/Sewer Telephone Basic Cable (no premium channels) Transportation (List monthly amount paid for gasoline, motor oil, necessary auto repairs, or the cost of public transportation.) Insurance (List the monthly amount paid for auto, health, homeowner/rental, and life insurance.) Auto Health	ount
Groceries (List the total monthly amount paid for groceries and number of people in your household.) # Utilities (List the monthly amount paid for electric, heating oil/gas, water/sewer, telephone, and basic cable.) Electric Heating Oil/Gas Water/Sewer Telephone Basic Cable (no premium channels) Transportation (List monthly amount paid for gasoline, motor oil, necessary auto repairs, or the cost of public transportation.) Insurance (List the monthly amount paid for auto, health, homeowner/rental, and life insurance.) Auto Health	
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Heating Oil/Gas Water/Sewer Telephone Basic Cable (no premium channels) Transportation (List monthly amount paid for gasoline, motor oil, necessary auto repairs, or the cost of public transportation.) Insurance (List the monthly amount paid for auto, health, homeowner/rental, and life insurance.) Auto Health	
Water/Sewer Telephone Basic Cable (no premium channels) Transportation (List monthly amount paid for gasoline, motor oil, necessary auto repairs, or the cost of public transportation.) Insurance (List the monthly amount paid for auto, health, homeowner/rental, and life insurance.) Auto Health	
Telephone Basic Cable (no premium channels) Transportation (List monthly amount paid for gasoline, motor oil, necessary auto repairs, or the cost of public transportation.) Insurance (List the monthly amount paid for auto, health, homeowner/rental, and life insurance.) Auto Health	
Basic Cable (no premium channels) Transportation (List monthly amount paid for gasoline, motor oil, necessary auto repairs, or the cost of public transportation.) Insurance (List the monthly amount paid for auto, health, homeowner/rental, and life insurance.) Auto Health	
Transportation (List monthly amount paid for gasoline, motor oil, necessary auto repairs, or the cost of public transportation.) Insurance (List the monthly amount paid for auto, health, homeowner/rental, and life insurance.) Auto Health	
Insurance (List the monthly amount paid for auto, health, homeowner/rental, and life insurance.) Auto Health	
Auto Health	
Health	
Homeowner/Rental	
Monicowiici/Rentai	
Life	
Clothing (List the monthly amount actually paid for clothing.)	
Loan Payments (List all monthly amounts paid toward verified loans, other than loans to family members, which are non-allowable expenses.)	
Credit Card Payments (List all monthly credit card or charge card payments.)	
Medical (List all monthly payments for necessary medical care or treatment.)	
Alimony/Child Support (List all alimony or child support payments made each month.)	
Co-payments (List the total monthly payments made for electronic monitoring and drug and mental health treatment.)	
Other (specify) (List all other necessary monthly amounts paid each month not yet reported.)	
Other Factors That May Affect Monthly Cash Flow (Describe)	
TOTAL	
NET MONTHLY CASH FLOW: \$ (CASH INFLOWS LESS NECESSARY CASH OUTFLOWS)	
MONTHLY CRIMINAL MONETARY PENALTY PAYMENT: \$	
PROSPECT OF INCREASE IN CASH INFLOWS (Give a general statement of the prospective increase of the value of any cash inflows reported.)	

Date ____

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(9/00)

REQUEST FOR MONTHLY CASH FLOW STATEMENT FINANCIAL RECORDS

DEFENDANT'S FULL NAME

DOCKET NUMBER

All entries on the Cash Flow Statement must be accompanied by supporting documentation. Provide the probation officer with all records listed below are applicable to your financial statements, along with your completed Cash Flow Statement by the close of

MONTHLY CASH INFLOWS

Salary/Wages

Copy of all W-2 forms submitted with the prior year income tax return.
 Copy of all pay stubs for the most recent one-month period.

Cash Advances

♦ Copy of all pay stubs documenting cash advances.

Cash Bonuses

 Copy of all pay stubs documenting cash bonuses, and copy of related 1099 form.

Commissions

♦ Copy of all 1099 forms submitted with the prior year income tax return.

Business Income

Copy of the past six monthly financial statements of all businesses owned or controlled by the defendant. Also, be sure to provide all financial information requested in the "Assets" portion of the "Net Worth Statement" under "Section K, Business Holdings."

Interest/Dividends

 Copy of most recent earnings statement from a financial institution (e.g., bank, brokerage firm, etc.). Copy of all 1099-INT forms, reporting annual interest earnings, for the past year.

Rental Income

 Copy of lease rental agreement, copy of monthly rental check received, and copy of the deposit on the defendant's monthly bank statement.

Trust Income

 Copy of the monthly trust income check, copy of the trust agreement, and a copy of the trust income tax return for the prior year.

Alimony/Child Support

 Copy of divorce decree, copy of payments received, and statements documenting child support/alimony obligations with payment history.

Social Security

 Copy of most recent Social Security check and most recent benefits determination letter.

Other Government Benefits

Copy of most recent government subsidy check (e.g., unemployment compensation, or child support/alimony) and most recent benefits determination letter.

Pensions/Annuities

 Copy of pension/annuity check, copy of most recent pension plan activity statement or annuity statement, and copy of pension plan or annuity contract.

Allowances (housing, auto, travel)

 Copy of related pay stub, 1099 form for prior year, and possibly a letter from the employer on company letterhead.

Gratuities/Tips

 Copy of current month's pay stubs, letter from employer estimating monthly gratuities earned, and W-2 form for the prior year.

Spouse (Significant Other's) Salary/Wages

♦ Copy of all W-2 forms submitted with the prior year income tax return. Copy of all pay stubs for the most recent one-month period.

Other Joint Spousal Income

Documentation verifying any monthly income jointly earned with the spouse or significant other, (e.g., income from the spouse or significant other or income from a business owned or controlled by the spouse or significant other, that the defendant has a joint ownership interest in, or controls).

Income of Others in the Home

♦ Verification of the monthly earnings of all others living in the defendant's household (e.g., all pay stubs for the prior month, W-2 forms, and 1099 forms for the prior year), paid receipts or canceled checks for necessary monthly household expenditures (e.g., for food, room rental, telephone, transportation, etc.) actually paid by this person on behalf of the defendant.

Gifts From Family

A signed and dated statement from the family member who gave gifts to the defendant during the month, listing the amounts, dates and reasons given, and a copy of the check received, if any.

Gifts From Others

A signed and dated statement from the person(s) who gave gifts to the defendant during the month, listing the amounts, dates and reasons given, and a copy of the check received, if any.

Loans From Your Business

Copy of the past six monthly financial statements of all businesses owned or controlled by the defendant that loaned money to the defendant, including a detailed schedule of the "Loans To Shareholder/Owner" or "Due From Shareholder/Owner" general ledger accounts.

Mortgage Loans

Copy of all mortgage checks received during the prior month, 1099 forms submitted with the prior year tax return, and copy of the sales agreement and escrow statement for all mortgage loans owed to the defendant.

Other Loans

 Copy of loan documentation and copy of all loan checks received during the prior month.

Other (specify)

 Documentation verifying the source of all other monthly cash inflows (not yet disclosed or reported in these financial statements) and copy of all related monthly checks received.

REQUEST FOR MONTHLY CASH FLOW STATEMENT FINANCIAL RECORDS (cont.)

NECESSARY MONTHLY CASH OUTFLOWS

Rent or Mortgage (including taxes)

 Copy of apartment rental lease agreement or home mortgage, most recent mortgage statement, and copy of canceled check.

Groceries (# of people)

 Grocery receipts with corresponding canceled checks (if applicable) for the past month.

Utilities

 Copy of most current utility bills (e.g., electric, heating oil/gas, water/sewer, telephone, and basic cable).

Transportation

 Current month gasoline/motor oil receipts and corresponding canceled checks (if applicable), and gasoline credit card statements for the prior month.

Insurance

 Copy of most current insurance bills for all types of insurance (auto, health, life, homeowners).

Clothing

Purchase receipts with corresponding canceled checks.

Loan Payments

Copy of loan statements (including motor vehicle payment book and lines of credit) for all loans. Also, provide a copy of any financial statements submitted to obtain credit in the past three years.

Credit Card Payments

 Copy of most current billing statement for all charge accounts (e.g., credit cards, revolving charge cards, and department store cards) and lines of credit (e.g., bank line of credit).

Medical

 Documentation of medical expenses (e.g., billing statements, payment receipts, and canceled checks).

Alimony/Child Support

 Copy of divorce decree, canceled checks, and statements documenting child support/alimony obligations with payment history.

Co-payments (electronic monitoring, drug/mental health treatment)

♦ Canceled check along with statement from the service provider (if any).

Other (specify)

♦ Specific receipts, billing statements, and corresponding canceled checks.

ADDITIONAL INSTRUCTIONS:				
A personal interview has been scheduled for you wi	th:			
		on		
U.S. Probation Officer			Date	
at	Office Location			
Time				
	T-11			
	Telephone			

DECLARATION OF DEFENDANT OR OFFENDER NET WORTH & CASH FLOW STATEMENTS

I,, residing at,
in the city (or county) of, in the state of,
have completed the attached Net Worth Statement (Prob. Form 48) or Net Worth Short Form Statement (Prob. Form 48EZ) and/or Cash Flow Statement (Prob. Form 48B) that fully describe my financial resources, including a
complete listing of all assets owned or controlled by me as of this date and any transfers or sales of assets since my arrest.
The Cash Flow Statement (Prob. Form 48B) also includes my financial needs and earning ability and the financial needs
and earning ability of my spouse (or significant other) and my dependent(s) living at home.
and carming ability of my spouse (of significant other) and my dependent(s) fiving at nome.
Net Worth Statement (Total pages, including additional pages)
Net Worth Short Form Statement (Total pages, including additional pages)
Cash Flow Statement (Total pages, including additional pages)
I declare under penalty of perjury that the foregoing is true and correct; or
False statements may result in revocation of supervision, in addition to possible prosecution under the provisions of 18 U.S.C. § 1001, which carries a term of imprisonment of up to 5 years and a fine of up to \$250,000, or both.
(Defendant Signature)
Executed on day of

Last Name	First Name	Middle Name	Social Security Number

Instructions for Completing Net Worth Short Form Statement

Having been convicted in the United States District Court, you are required to prepare and file with the probation officer an affidavit fully describing your financial resources, including a complete listing of all assets you own or control as of this date and any assets you have transferred or sold since your arrest. Amendments were made to 18 U.S.C. §§ 3663(a)(1)(B)(i), 3664(d)(3), and 3664(f)(2), and Rule 32(b)(4)(F) to clarify that the assets owned, jointly owned, or controlled by a defendant, and liabilities are all relevant to the court's decision regarding the ability to pay. Your Net Worth Statement should include assets or debts that are yours alone (I-Individual), assets or debts that are jointly (J-Joint) held by you and a spouse or significant other, assets or debts that are held by a spouse or significant other (S-Spouse or Significant Other) that you enjoy the benefits of or make occasional contributions toward, and assets or debts that are held by a dependent (D-Dependent) that you enjoy the benefits of or make occasional contributions toward. The court may require relating to such other factors as the court deems appropriate (see 18 U.S.C. § 3664(d)(3)).

If you are placed on probation or supervised release (or other types of supervision), you may be periodically required to provide updated information fully describing your financial resources and those of your dependents, as described above, to keep a probation officer informed concerning compliance with any condition of supervision, including the payment of any criminal monetary penalties imposed by the court (see 18 U.S.C. § 3603).

Please complete the Net Worth Short Form Statement in its entirety. You must answer "None" to any item that is not applicable to your financial condition. Attach additional pages if you need more space for any item. All entries must be accompanied by supporting documentation (see Request for Net Worth Statement Financial Records (Prob. 48A)). Sign and date Page 2 (including any attached pages). Also, sign, date, and attach the Declaration of Defendant or Offender Net Worth & Cash Flow Statements (Prob. 48D).

NET WORTH SHORT FORM STATEMENT

		ASSETS	
	ow all cash on hand, bank accounts, securities notor vehicles, real estate, mortgage loans owe		
I/J Type of Asset S/D (e.g., cash, bank account)		Location of Asset (e.g., bank, including account number)	Fair Market or Actual Value
	ow all assets transferred or sold since your ardse is holding on your behalf.	rest with a cost or fair market value of 1	more than \$500.00, or assets that
I/J S/D	Type of Asset	Date Sold or Transferred	Fair Market or Actual Value
_			
	low any assets you will liquidate to satisfy any increase in assets.	y criminal monetary penalty that may b	e imposed, and/or describe the
I/J S/D	Type of Ass	et	Fair Market or Actual Value
\perp			
nclude bel	ow all charge accounts and lines of credit, mo	LIABILITIES ortgage balances, other debts, civil suits	, and bankruptcy filings.
I/J S/D	Type of Debt (e.g., credit card)	Debt Owed to (e.g., name, account number)	Balance Outstanding

Signature	Date	

REQUEST FOR SELF-EMPLOYMENT RECORDS

DEFENDANT'S FULL NAME	DOCKET NUMBER
In order to verify your self-employment, you are requir business to the probation office by the close of business	red to furnish all of the records below that are applicable to you and your s

- ♦ Business Bank Statements for all businesses for the past six months (along with canceled checks).
- ♦ All Business Income Tax Returns for the past five years (including Corporation Form 1120, S Corporation Form 1120S, Partnership Form 1065, Limited Liability Company Form 1065, or Sole Proprietor Form 1040 Schedule C), along with all accompanying forms and schedules.
- ♦ All Annual Financial Statements for the past five years.
- **♦** Most Recent Monthly and Quarterly Financial Statement.
- ♦ Quarterly Estimated Tax Payments (Form 1040-ES or Form 8109 for corporations) for the current year.
- ♦ Occupational Business License for the current year.
- ♦ Articles of Incorporation for all corporations you own or have an interest in.
- ◆ Partnership Agreement for all partnerships you have an ownership interest in.
- ♦ Sales Tax Returns (monthly, quarterly) for the past 12 months.
- ♦ **Property Tax Returns** (inventory, personal property) for the past year.

- ♦ Payroll Tax Returns (quarterly, annually) for the current year, if you presently have or have had employees during the current year.
- ♦ **List of Business Customers** (to whom your business sells goods or provides services).
- ♦ **List of Business Vendors** (who supply the needed raw materials to produce products or provide services).
- Billing Statements (to collect money from your customers) and Vendor Invoices (to pay bills to your suppliers) for the past six months.
- ♦ Real Estate Escrow Statements and Real Estate Leases for all businesses you own or have an interest in.
- ♦ Equipment Purchase Agreements or Leases for all businesses you own or have an interest in.
- ♦ Business Insurance Policies for all businesses you own or have an interest in.
- ♦ Business Telephone Bills for the past six months for all business telephones.
- ♦ Samples of Business Advertisements (e.g., in print, radio, television, Internet web page, telephone directory listing and ad, etc.).
- ♦ Business Cards, Stationery (e.g., business letterhead).

CUSTOMER CONSENT AND AUTHORIZATION FOR ACCESS TO FINANCIAL RECORDS DURING SUPERVISION

I,	, having read the explanat	tion
	(Name of Customer)	
with 18 U.S.C. § 3603, I am re	this form, and having been convicted in the United States District Court, and in according to provide complete disclosure of all assets I own or control, fully describe my finabation officer for the purpose of probation or supervised release supervision ordered at the	ancial
	(Name and Address of Financial Institution or Credit Agency)	
to disalosa the following finen	l recorde:	
to disclose the following finan	records.	
to	, an officer of the, an officer of the, and, and,	2
	(Name of Probation Officer Milowed Necess)	
United States District Court fo		,
	(Name of District Court)	
the payment of any criminal meto the financial litigation unit of I understand that this authorized, are disclosed, and that the	obation officer informed concerning compliance with any condition of supervision, incertary penalties imposed by the court, and that this financial information may be transfering United States attorney's office for the purpose of the collection of financial penaltic reation may be revoked by me in writing at any time before my records, as described authorization is valid from the date of my signature until my release from supervision orization cannot be required as a condition of my doing business with the above-named	erred es.
imanciai mstitution.		
(Date)	(Signature of Customer)	
	(Address of Customer)	
	(City/State/Zip Code)	

STATEMENT OF CUSTOMER RIGHTS UNDER THE RIGHT TO FINANCIAL PRIVACY ACT OF 1978

(Disclosure to Financial Institutions, But Not Credit Agencies)

Federal law protects the privacy of your financial records. Before banks, savings and loan associations, credit unions, credit card issuers, or other financial institutions may give financial information about you to a federal agency, certain procedures must be followed.

Consent to Financial Records

You may be asked to consent to make your financial records available to the government. You may withhold your consent, and your consent is not required as a condition of doing business with any financial institution. If you give your consent, it can be revoked in writing at any time before your records are disclosed and, in any event, is effective for a period of not more than three months. Your financial institution must keep a record of the instances in which it discloses your financial information to the government, and this record will be available to you upon request, unless a court order restricting your right to such record has been obtained by the government.

Without Your Consent

Without your consent, a Federal agency that wants to see your financial records may do so ordinarily only by means of a lawful subpoena, summons, formal written request, or search warrant for that purpose.

Generally, the Federal agency must give you advance notice of its efforts to obtain your records by one of the above means, explaining why the information is being sought and telling you how to object in court to the release of your records.

Exceptions

If the government obtains a search warrant for your records, or if the government convinces the court that there are legitimate reasons to delay giving you notice, the Federal agency will be able to obtain your records without providing you notice beforehand.

In situations where you do not receive advance notice that the government is seeking your financial records, you will be notified once the reason for the delay of notice no longer exists.

Transfer of Information

Generally, a Federal agency which obtains your financial records is prohibited from transferring them to another Federal agency unless it certifies in writing that the transfer is proper as noted on the reverse side of this form and sends a notice to you that your records have been sent to another agency.

Penalties

If the Federal agency or financial institution violates the Right to Financial Privacy Act, you may sue for damages or to seek compliance with the law. If you win, you may be repaid your attorney's fees and costs.

MONTHLY MONEY MANAGEMENT WORKSHEET

CASH INFLOWS	1st Week	2 nd Week	3 rd Week	4 th Week
Your Wages (Pay Dates)				
Spouse's Wages (Pay Dates)				
Other Cash Inflows				
Other Cash Inflows				
(1) TOTAL CASH INFLOWS				
CASH OUTFLOWS				
FIXED EXPENSES				
Rent or Mortgage Due				
Public Transportation Due				
Car Payment Due				
2 nd Car Payment Due				
Auto/Home/Rental/Life Insurance Payment Due				
Child Care Due				
Loan Payment Due				
Loan Payment(s) Due				
Credit Card Payment(s) Due				
All Court-ordered Payment(s)				
Basic Cable Payment Due				
VARIABLE EXPENSES				
Groceries				
Eating Out - Dinners				
Eating Out - Lunch				
Laundry/Dry Cleaning				
Utilities Due				
Water/Sewer Due				
Telephone Due				
PERIODIC EXPENSES				
Medications/Prescriptions				
Doctor/Dentist				
Clothing				
Car Maintenance				
Car Repair				
Other (Describe)				
(2) TOTAL CASH OUTFLOWS				
(3) NET CASH INFLOW ((1)-(2))				